



PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Paul Peterson et al.

Serial No.: 10/033,331 Group No.: 1724
Filed: November 1, 2001 Examiner: Cintins, Ivars C.
For: WATER TREATMENT SYSTEM
Docket No.: 15-724

MAIL STOP NO FEE AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for approval by examiner for this application.

STATUS

2. Applicant is

XXX a small entity
_____ other than a small entity.

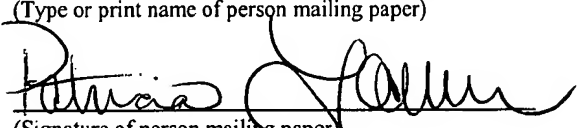
CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: "Mail Stop No Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450".

Patricia L. Tanner

(Type or print name of person mailing paper)

Date: April 5, 2004


(Signature of person mailing paper)

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37CFR 1.136 apply.

(complete (a) or (b) as applicable)

(a) _____ Applicant petitions for an extension of time for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
_____	one month	\$ 110.00	\$ 55.00
_____	two months	410.00	205.00
_____	three months	930.00	465.00
_____	four months	1,450.00	7250.00

Fee \$ _____

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

_____ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

(b) XXX Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)		Small Entity		Other than a Small Entity
	Claims Remaining After Amendment		Highest No. Previously Paid for		Present EXTRA		Addit. Fee		Addit. Fee
TOTAL	MINUS	20	=		x 9 = \$		x 18 = \$		
INDEP.	MINUS	3	=		x 43 = \$		x 86 = \$		
_____	First Presentation of Multiple Dep. Claim				x 125 = \$		x 250 = \$		

Total \$ _____ or Total \$72.00

* If the Highest No. Previously Paid for in this space is less than 20, enter "20".

** If the Highest No. Previously Paid for in this space is less than 3, enter "3".

(c) XXX No additional fee is required

OR

(a) _____ Total additional fee required \$ _____

FEE PAYMENT

5. ___ Attached is a check in the sum of \$ ___
 ___ Charge Account No. 23-0630 in the sum of \$ ___

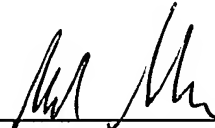
Fee Deficiency

6. XXX If any additional extension and/or fee is required, this is the request therefor and to charge Account No. 23-0630

And/Or

XXX If any additional fee for claims is required, charge Account No. 23-0630.

Reg. No.: 50,732



Signature of Attorney

Tel. No.: (216) 241-6700
Fax No.: (216) 241-8151

Michael A. Miller

Type or Print Name of Attorney

WATTS HOFFMANN CO., L.P.A.
P.O. Box 99839
Cleveland, OH 44199-0839